



Georgia-Pacific Corporation

P.O. Box 337350
N Las Vegas, NV 89033
Telephone (702) 643-8100
Fax (702) 643-2049

January 31, 2004

M/041/009
M/015/072 *A*
M/015/050

Darron Haddock
Utah Division of Oil, Gas and Mining
1594 West North Temple Suite 1210
P.O. Box 145801
Salt Lake City, UT 84114-5801

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FEB 04 2005

RE: G-P Gypsum Corporation
Gypsum Quarries Annual Reports DIV. OF OIL, GAS & MINING
M/041/009, M/015/072, M/015/050

Dear Mr. Hedberg:

Enclosed please find annual reports for 2004 for G-P Gypsum Corporation's gypsum quarries.
Concerning maps, nothing has changed since the most recently submitted maps.

If you have any questions, or require additional information, I can be reached at 702-643-8100
x305.

Sincerely,

Russell Harms

Enclosure

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING
1594 West North Temple - Suite 1210
Box 145801
Salt Lake City, Utah 84114-5801
Telephone: (801) 538-5291
Fax: (801) 359-3940

ANNUAL REPORT OF MINING OPERATIONS

The informational requirements of this form are based on provisions of the Mined Land Reclamation Act, Title 40-8, Utah Code Annotated 1953, as amended, and the General Rules as promulgated under the Utah Minerals Regulatory Program. An operator conducting mining operations under a Notice of Intention must file an annual operations and progress report (FORM MR-AR) with the Division.

I. General Information

1. Report Time Period: From (mo./yr.) 1/04 To (mo./yr.) 12/04
2. DOGM File Number (Mine No): M 015 072
3. Mine Name: HEBE QUARRY
4. Mineral(s) Mined (or permitted to mine): GYPSUM
5. Type of mine: ☒ Surface Mine or ☐ Underground Mine
6. Legal Description (Location of Lands Affected):
NE 1/4, NW 1/4, ___ 1/4, Section 23, Township 24S, Range 7E
NW 1/4, NE 1/4, ___ 1/4, Section 23, Township 24S, Range 7E
SW 1/4, NE 1/4, ___ 1/4, Section 23, Township 24S, Range 7E
7. Name of Operator or Company: G-P GYPSUM CORP (CLOSED)
8. Permanent Street Address: 200 S. STATE ST.
City, State, Zip: SALT LAKE CITY, UT 84657
Phone: NA Fax: NA
9. Company Representative (or designated operator):
Name: TOM BROOKS
Title: PLANT MANAGER
Business Address: P.O. BOX 337350
City, State, Zip: N. LAS VEGAS, NV 89033
Phone: 702 645 8100 Fax: 702 643 2049
☐ Please check if any of the above information has changed since previous year.

II. Mining and Reclamation

1. Was there any mine related activity during the past year? Yes ☐ No ☒
2. If no - what was the last year of activity? 2002
3. If yes - how much ore or mineral was mined? _____

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2/16/05 PRB

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DIV OF OIL GAS & MINING

4. Briefly describe the type of work performed, volume of material moved, and any new or additional surface disturbances that occurred during the past year.

NO ACTIVITY

5. How much **additional acreage** was disturbed during the past year? 0
6. How much acreage was **reclaimed** during the past year? 0
7. Briefly describe the reclamation work performed during the past year. This description should include methods employed, and an evaluation of the results.

NO RECLAMATION

8. What is the **total** disturbed acreage of entire project at years end? 17.5
9. Briefly summarize any mining and/or reclamation plans for the upcoming year.

POSSIBILITY OF MINING AND/OR RECLAMATION
LATER IN YEAR

NOTE: Section III., "Additional Information" applies only to **large mining operations**.

III. Additional Information - R647-4-121.2 and .3

1. **The operator shall include an updated map depicting surface disturbance and reclamation performed during the year**, prepared in accordance with Rule R647-4-105.
2. The operator shall keep and maintain timely records relating to his performance under the Act, and shall make these records available to the Division upon request.

IV. Signature Requirement

I hereby certify that the foregoing is true and correct.

Name (Typed or Print): THOMAS C. BROOKS

Title of Operator: PLANT MANAGER

Signature of Operator: 

Date: 01-31-05